

# 2015 City of Borger Park Recreation Program Registration For children starting $\mathbf{1}^{ST}$ grade through starting $\mathbf{8}^{th}$ grade only June $\mathbf{8}^{th}$ through July $\mathbf{31}^{st}$ , 2014

| Child's Name:Parent Name:  | _                       |                       |        |          |            |
|--|-------------------------|-----------------------|--------|----------|------------|
| Address:   |                         |                       |        |          |            |
| Home Phone Number:   | Work                    | x Phone Number:       |        |          | -          |
| Cell Phone Number:   | Alternate Phone Number: |                       |        |          |            |
| Child's Doctor:  | Doctor                  | 's Phone Number: _    |        |          |            |
| Emergency Contact Name:  |                         | Emergency Phone       |        |          |            |
| If I decide to allow someone else to<br>Recreation Program, only the follo |                         | •                     |        | O        |            |
| Name:  | Ph                      | one Number:           |        |          | -          |
| Name:  | me: Phone Number:       |                       | -      |          |            |
| Name:  | Ph                      | one Number:           |        |          |            |
| X  |                         |                       |        |          |            |
| Signature of Parent/Guardian   |                         | Date                  |        |          |            |
| Di   | 41                      |                       |        |          |            |
| Please list any allergies, illnesses or stings, asthma):                   | r otner ned             | cessary medical infor | matioi | ı (aller | gic to bee |
|  |                         |                       |        |          |            |

| about the child:   | of Borger Park Recreation staff should know  |
|--|--|
| ACKNOWLEDGEMENT FOR MI   | INORS (PARENTAL CONSENT FORM)  |
| I,   | , here by acknowledge that as  |
|  | , a minor, I agree to  |
| City of Borger Park Recreation Program. To everything in their power to prevent accided possible. However, should an accident occur  | cur during programs and activities offered by the The City of Borger Park Recreation staff will do ents and to monitor all activities as closely as ar while my child is under the City of Borger's ad the Borger Independent School District from |
| X  |  |
| Signature of Parent/Guardian   | Date   |
| Parks and Recreation Program, which will understand that these Activities include rid holds a current, valid Texas CDL Driver's I Youth Center Complex, field trips; other paused to provide a nutritious meal. In the extreatment is deemed necessary by the City of authorization is given to the City of Borger evaluation and treatment. |  |
| X  |  |

#### **PERMISSION TO WALK HOME**

| My child   | has my permission to walk home from Huber Park   |
|--|--|
| when Park Recreation is over for the   | day.   |
| ${f v}$  |  |
| X<br>Signature of Parent/Guardian  | Date   |
|  |  |
| PARE   | ENTS CODE OF ETHICS  |
| Borger Park and Recreation Program understand that it will be mandatory by the City of Borger Park and Recreation Program are here to proving the language and any other disruptive be will be allowed unless there is enough also applies to the staff of Park Recreation and cold Kool-Aid and water program starts at 8:00 a.m. and ends Park Recreation staff is not responsibly will notify the Park Recreation staff a Drop offs will only be allowed between head count for the day. Children will can't make ANY EXCEPTIONS!! Pleating the park of the day. Children is child up early for the day. Children in the lay. | hat the Rules and Regulations are set by the City of mand agree to follow their guidelines. I also for my child to follow all rules and instructions given eation Program staff. The City of Borger Park and ride a safe and hazard free summer. Poor attitudes, foul chavior will not be tolerated. No outside food or drinks in for everyone attending Park Recreation. This rule eation. A lunch and snack will be provided daily free of will always being available. I also understand that this at 3:30 p.m. each afternoon and the City of Borger ble for my child after this time. If I am going to be late I at the time of arrival, or I will call as soon as possible. In 8:00 a.m. and 9:00 a.m. so staff can get a definite I not be allowed to be dropped off after 9 a.m. and we ease let a staff employee know if you are picking your not picked up by 3:45 p.m. will be taken to the Borger istances may a staff employee furnish transportation to reation Program. |
| X  |  |
| Signature of Parent/Guardian   | Date   |
|  | unconditional right to use the name, voice and amed child in connection with any of their audio/video s, but not as an endorsement.  |
| X  |  |
| X  | Date   |
|  |  |

#### **PARTICIPANTS CODE OF ETHICS**

As a participant, I understand that the rules and regulations set by the City of Borger Park Recreation Program are for my own safety. I agree to follow all the rules and regulations and to as always display good sportsmanship and to be on my best behavior while in the City of Borger Park Recreation Program or activity. The City of Borger Park Recreation Program is here to provide a safe and hazard free summer. I understand poor attitudes, foul language and any other disruptive behavior will not be tolerated. X **Signature of Participant** Date WEATHER RELATED INFORMATION In case of cool weather, rain or nonthreatening thunder storms the program will be moved to, Johnson Park Youth Center Complex. In this event, please pick your children up at the Johnson Park Youth Center complex on Bulldog Blvd. at 3:30 p.m. (North of the Dome). If weather becomes threatening please pick up children as soon as possible at Johnson Park Youth Complex. For updated information on Johnson Park Youth Center and the Park Recreation Program 2014 concerning weather, closing, emergencies, etc. please call Johnson Park Youth Center at 806-275-9014 or Annadon Keys, Supervisor, 806-231-8979 **Signature of Participant** Date PROGRAM RULES NO NAME CALLING. NO CUSSING AND /OR SLANG WORDS OR GESTURES. NO SPITTING. NO BITING OR HITTING. NO THROWING THINGS AT OTHERS. NO FIGHTING, KEEP YOUR HANDS TO YOURSELF. NO TACKLE FOOTBALL, WRESTLING OR BOXING. NO RACIAL REMARKS OR COMMENTS. NO DISRESPECTFUL BEHAVIOR. NO DAMAGE TO THE FACILITY OR EQUIPMENT (MUST PAY TO

REPLACE OR REPAIR).

| <br>NO SMOKING OR ANY OTHER TOBACCO PRODUCT.          |
|---|
| <br>NO PDA (PUBLIC DISPLAY OF AFFECTION).             |
| <br>NO OUTSIDE FOOD OR DRINKS WILL BE ALLOWED, UNLESS |
| THERE IS ENOUGH FOR EVERYONE.                         |
| <br>IF YOU GET SOMETHING OUT YOU ARE RESPONSIBLE FOR  |
| PUTTING IT AWAY.                                      |
| <br>USE COMMON SENSE, TREAT OTHERS THE WAY YOU WANT   |
| TO BE TREATED.  |

NOT FOLLOWING THE RULES WILL BE GROUNDS FOR SUSPENSION AND POSSIBLE EXPLUSION FROM THE PROGRAM. PLEASE REMEMBER THIS PROGRAM IS FOR CHILDREN 1st THRU 7<sup>TH</sup> GRADE.

ANY CHILD ABUSING THE RULES OF THE CITY OF BORGER PARK RECREATION PROGRAM WILL BE DICIPLINED BY USING THE "THREE STRIKES, YOU'RE OUT" RULE.  $1^{ST}$  OFFENSE- WARNING,  $2^{ND}$  OFFENSE-1-3 DAYS SUSPENSION FROM

THE PROGRAM, 3<sup>RD</sup> OFFENSE – SUSPENDED FROM THE PROGRAM FOR THE REMAINDER OF THE SEASON.

AUTOMATIC SUSPENSION FOR FIGHTING, PHYSICAL VIOLENCE, MAJOR DAMAGE TO FACILITY OR EQUIPMENT (MUST PAY TO REPLACE OR REPAIR), WEAPONS OR DRUGS AND DRUG PARAPHERNALIA.

The following guide line will be enforced for every child automatically:

Name calling or yelling at the staff or another child: Home for the day, second offense three (3) days suspension, third offense out of the program.

Cussing: First offense two (2) days suspension, second offense one (1) week suspension, Third offense out of the program. Racial remarks or comments about another child or staff members: First offense, one (1) week suspension, second offense 2 (two) weeks, third offense out of the program.

Fighting: First offense (1) week suspension, second offense 2 (two) weeks suspension, third offense out of the program.

At anytime the Borger Police Department is called to control a child, that child will automatically be out of the program, NO EXCEPTIONS!!!!!

Peyton McWilliams is the Park Recreation Manager and his office is located at Huber Park and his cell phone number is 231-9540. For Additional information contact Johnson Park

Youth Complex supervisor Annadon Keys at 231-8979 or Johnson Park Youth Center Complex at 275-9014. Note: Children need to be at bus stop five minutes before pickup.

This information has been provided for you and your child to ensure consistency in the operational procedures at the City of Borger Park and Recreation Program at Huber Park. I have read the above information and will discuss the rules and conditions with my child. I accept financial responsibility for the actions of my child and understand my child will be suspended until financial obligations have been met.

| X                            | X    | _ X                      |  |
|------------------------------|------|--------------------------|--|
| Signature of Parent/Guardian | Date | Signature of Participant |  |

# <u>CITY OF BORGER</u> PARK RECREATION PROGRAM 2013 MOTTOS ARE:

#### 1. EVERYONE NEEDS A GOOD ROLE MODEL!!

#### 2. GET UP, GET OUT AND GET ACTIVE!!!

Thank you for your help and understanding by filling out <u>all</u> of the paperwork for our program. It is very important and helpful to ensure all children enrolled in the Park Recreation Program 2014 have a safe and fun summer.

Annadon Keys, Supervisor

**Johnson Park Youth Center** 

231-8979 or akeys@ci.borger.tx.us

For updated information on Johnson Park Youth Center and the Park Recreation Program 2014 concerning weather, closing, emergencies, etc. please sign up on

### **Attention Please!!!**

If your child is going to be picked up by someone other than you, the people that you have listed, going to leave early or <u>they have your permission</u> to ride a bus other than the one they rode to Park Recreation on <u>PLEASE SEND A NOTE WITH YOUR CHILD!!</u>

The buses that Park Recreation are color coded: BLUE, GREEN AND YELLOW!!

Your help with this request will help us determine if a child is able to change buses or can leave with someone you have approved of. All notes will be placed in your child's folder, if they don't have a note we will not allow them to leave or change buses for their safety.

Thank You,

Annadon Keys, Supervisor: Office number is 806-275-9014 and my cell is 806-231-8979 Peyton McWilliams, Park Recreation Manager: 806-231-9540



Signature of Parent/Guardian

## **Medical Release Form**

| In the   | event of injury or illness for which medical treatment is deemed |  |  |  |
|--|--|--|--|--|
| necessary by the City of Borger, Johnson Park Youth Center Supervisor or Park Recrea |  |  |  |  |
| Program Manager. My auth   | norization is given to the City of Borger to transport by        |  |  |  |
| ambulance to Golden Plains   | Hospital for evaluation and treatment.                           |  |  |  |
| For my child   | I grant the City of Borger full permission.                      |  |  |  |
| X  | Date:  |  |  |  |
| Signature of Parent/Guardia  | ın   |  |  |  |
| Parent/guardian of   |  |  |  |  |
| accept liability for any injur   | ies that may occur during programs and activities offered by the |  |  |  |
| _  | ion Program. The City of Borger Park Recreation staff will do    |  |  |  |
| • •  | prevent accidents and to monitor all activities as closely as    |  |  |  |
| •  | n accident occur while my child is under the City of Borger's    |  |  |  |
| any and all liability.   | ty of Borger and the Borger Independent School District from     |  |  |  |
|  |  |  |  |  |
| X  | Date:  |  |  |  |